	's (Supplemental Page)
(Child's Name)	、

	Child's	Name
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What do we want to accomplish? (Outcome)		Key Word and/or Number:		
Who will be involved?		* Review Codes  1 = We did it! 2 = Still working on it 3 = Objective changed 4 = Postponed  6 = Objective not addressed a. Waiting for placement b. No funding source c. Other		
What steps need to be taken? (List measurable behavioral objectives.)	How will we know when the objective is achieved? (Measurable evaluation criteria.)	5 = Parent declined service  Strategies and Activities	Where will this happen? (Provide justification, if not a natural learning environment.)	Objective Reviewed? (*Code/Date/Initials.)

September 2008 Infant Toddler Program IFSP Supplement